

Rev. 4/18

UNITED STATES COURT OF APPEALS
FOR THE ELEVENTH CIRCUIT
CIVIL APPEAL STATEMENT

Please TYPE. Attach additional pages if necessary.

11th Circuit Docket Number: 23 - 10425 D D _____

Caption:
PLOWRIGHT

V.

MIAMI DADE

District and Division: SOUTHERN DIST. FLORIDA
Name of Judge: K. M MOORENature of Suit: ☐ CIVIL RIGHTS

Date Complaint Filed: 1/17/22

District Court Docket Number: 22-CV-20203

Date Notice of Appeal Filed: 2 / 8 / 23

☐ Cross Appeal ☐ Class Action

Has this matter previously been before this court?

☐ Yes ☒ No

If Yes, provide

(a) Caption: _____

(b) Citation: _____

(c) Docket Number: _____

☐
☐
☐

Attorney Name

Mailing Address

Telephone, Fax, Email

For Appellant:

XXX Plaintiff WILLIAM C ROBINSON P.O BOX 610575 N MIAMI FLA 33261
3054549632 Robinsonwilliam8@gmail.com☐ Defendant☐ Other (Specify)For Appellee: ERICA S. ZARON 111 NW 1ST ST MIAMI FLA 33130

3053755151 ERICA.ZARON@MIAMIDADE.GOV

☐ Plaintiff☐ Defendant☐ Other (Specify)

Please CIRCLE/CHECK/COMPLETE the items below and on page 2 that apply.

Jurisdiction	Nature of Judgment	Type of Order	Relief
<input type="checkbox"/> XX Federal Question	<input type="checkbox"/> Final Judgment, 28 USC 1291	<input checked="" type="checkbox"/> Dismissal/Jurisdiction	Amount Sought by Plaintiff: \$200K
<input type="checkbox"/> Diversity	<input type="checkbox"/> Interlocutory Order, 28 USC 1292(a)(1)	<input type="checkbox"/> Default Judgment	Amount Sought by Defendant: \$
<input type="checkbox"/> US Plaintiff	<input type="checkbox"/> Interlocutory Order Certified, 28 USC 1292(b)	<input type="checkbox"/> Summary Judgment	Awarded: <input type="checkbox"/>
<input type="checkbox"/> US Defendant	<input checked="" type="checkbox"/> Interlocutory Order, Qualified Immunity	<input type="checkbox"/> Judgment/Bench Trial	to <input type="checkbox"/>
	<input type="checkbox"/> Final Agency Action (Review)	<input type="checkbox"/> Judgment/Jury Verdict	Injunctions:
	<input type="checkbox"/> 54(b)	<input type="checkbox"/> Judgment/Directed Verdict/NOV	<input type="checkbox"/> TRO
		<input type="checkbox"/> Injunction	<input type="checkbox"/> Preliminary <input type="checkbox"/> Granted
		<input type="checkbox"/> Other _____	<input type="checkbox"/> Permanent <input type="checkbox"/> Denied

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11th Circuit Docket Number: _____

Based on your present knowledge:

- (1) Does this appeal involve a question of First Impression? ☐ Yes ☒ No
What is the issue you claim is one of First Impression? _____
- (2) Will the determination of this appeal turn on the interpretation or application of a particular case or statute? ☐ Yes ☒ No
If Yes, provide
(a) Case Name/Statute _____
(b) Citation _____
(c) Docket Number if unreported _____
- (3) Is there any case now pending or about to be brought before this court or any other court or administrative agency that
(a) Arises from substantially the same case or controversy as this appeal? ☐ Yes ☒ No
(b) Involves an issue that is substantially the same, similar, or related to an issue in this appeal? ☐ Yes ☒ No
If Yes, provide
(a) Case Name _____
(b) Citation _____
(c) Docket Number if unreported _____
(d) Court or Agency _____
- (4) Will this appeal involve a conflict of law
(a) Within the Eleventh Circuit? ☐ Yes ☒ No
(b) Among circuits? ☐ Yes ☒ No

If Yes, explain briefly:

- (5) Issues proposed to be raised on appeal, including jurisdictional challenges:

Qualified and Sovereign Immunity
Implementation of Training By Government

I CERTIFY THAT I SERVED THIS CIVIL APPEAL STATEMENT ON THE CLERK OF THE U.S. COURT OF APPEALS FOR THE ELEVENTH CIRCUIT AND
SERVED A COPY ON EACH PARTY OR THEIR COUNSEL OF RECORD, THIS 78 DAY OF FEB 2023.

William C. Robinson

NAME OF COUNSEL (Print)

[Signature]

SIGNATURE OF COUNSEL